## **2023 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N14000011035

Entity Name: FUNDACION LATINOAMERICANA PARA EL DESARROLLO

SOCIAL, INC.

**Current Principal Place of Business:** 

9239 HOENSTEIN AVENUE ORLANDO, FL 32824

**Current Mailing Address:** 

9239 HOENSTEIN AVENUE ORLANDO, FL 32824 US

FEI Number: 47-2461014 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EAGLE LEGAL EYES SERVICES, LLC 111 E. MONUMENT AVENUE SUITE 401 KISSIMMEE, FL 34741 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: SHARON MADISON 04/30/2023

Electronic Signature of Registered Agent

Date

FILED Apr 30, 2023

Secretary of State

3191867977CR

Officer/Director Detail:

 Title
 PRESIDENT
 Title
 V PRESIDENT

 Name
 GUZMAN, JOSE LUIS
 Name
 SOLIS, ALFREDO

Address 9239 HOENSTEIN AVENUE Address 9239 HOENSTEIN AVENUE

City-State-Zip: ORLANDO FL 32824 City-State-Zip: ORLANDO FL 32824

Title V PRESIDENT Title DIRECTOR OF SPORTS

Name REYNOSO, PAULINO ANTONIO Name ROSARIO, JOSE A

REVEREND

Address 9239 HOENSTEIN AVENUE Address 3437 PALMER DRIVE

City-State-Zip: KISSIMMEE FL 34741

City-State-Zip: ORLANDO FL 32824

Title ADVISOR

Title EXE ADMIN, TREASURER Name MADISON , SHARON

Name GUZMAN, BELKIS R Address 111 E. MONUMENT AVENUE

Address 9239 HOENSTEIN AVENUE SUITE 401

City-State-Zip: ORLANDO FL 32824 City-State-Zip: KISSIMMEE FL 34741

Title ASST TREASURER Title GENERAL SECRETARY

Name LOPEZ REGALADO, ILONKA DEL Name URRACA, ROMULO

CARMEN

Address 9239 HOENSTEIN AVENUE City-State-Zip: ORLANDO FL 32824

City-State-Zip: ORLANDO FL 32824

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9239 HOENSTEIN AVENUE

Address

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GUZMAN, JOSE LUIS PRESIDENT 04/30/2023

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title CHAPLAIN Title CHAPLAIN

Name ALVARADO, MARLON Name NUNEZ CANELA, GILBERTO

ADDRESS REVEREND

**OPERATING OFFICER** 

MOREL, HECTOR

Address 9239 HOENSTEIN AVENUE Address 9239 HOENSTEIN AVENUE

City-State-Zip: ORLANDO FL 32824 ORLANDO FL 32824

City-State-Zip: ORLANDO FL 32824

Title

Title CHAPLAIN

Name GRULLON ESTRELLA, JUAN DIOGENIS

DR./REVEREND Name

Address 9239 HOENSTEIN AVENUE Address 9239 HOENSTEIN AVENUE

City-State-Zip: ORLANDO FL 32824 City-State-Zip: ORLANDO FL 32824

Title ADVISOR

Name MARTÍNEZ GUZMAN , MIRIAM

Address 9239 HOENSTEIN AVENUE

City-State-Zip: ORLANDO FL 32824